

# **AGENCY STRATEGIC PLAN**

**FOR THE FISCAL YEARS**

**2003 - 2007**



**DEPARTMENT OF HUMAN SERVICES  
DIVISION OF MEDICAL SERVICES**

**FUNCTIONAL AREA: HEALTH & HUMAN SERVICES**

# **AGENCY STRATEGIC PLAN APPROVAL FORM**

**FOR THE FISCAL YEARS**

**2003 - 2007**

**Ray Hanley**

**Division Director  
Division of Medical Services**

# TABLE OF CONTENTS

## **AGENCY: DMS**

MISSION..... Page 1

GOALS..... Page 1

## **PROGRAM: Administration**

DEFINITION..... Page 2

GOALS, OBJECTIVES, STRATEGIES ..... Page 2

PERFORMANCE MEASURES..... Page 4

## **PROGRAM: Prescription Drug Program**

DEFINITION..... Page 7

GOALS, OBJECTIVES, STRATEGIES ..... Page 7

PERFORMANCE MEASURES..... Page 9

## **PROGRAM: Long Term Care Program**

DEFINITION..... Page 10

GOALS, OBJECTIVES, STRATEGIES ..... Page 10

PERFORMANCE MEASURES..... Page 11

## **PROGRAM: Hospital/Medical Program**

DEFINITION..... Page 12

GOALS, OBJECTIVES, STRATEGIES ..... Page 12

PERFORMANCE MEASURES..... Page 14

## **PROGRAM: Tobacco Settlement Medicaid Expansion Program**

DEFINITION..... Page 16

GOALS, OBJECTIVES, STRATEGIES ..... Page 16

PERFORMANCE MEASURES..... Page 28

# STRATEGIC PLAN

<b>Agency Name</b>	DHS – Division of Medical Services
<b>Agency Mission Statement:</b> To ensure that high quality and accessible health services are provided to citizens of our state eligible for Medicaid, nursing home care and qualified children with special health care needs.	

## **AGENCY GOAL 1:**

To provide administrative support for the Division of Medical Services.

## **AGENCY GOAL 2:**

To provide quality health care services to enrolled participants in Division of Medical Services programs and to increase awareness and improve access to Division of Medical Services services.

# STRATEGIC PLAN

<b>Agency Name</b>		DHS Division of Medical Services
<b>Program</b>		Administration
<b>Program Authorization</b>		ACA 25-10-102 et seq.;42 CFR, State Operations Manual,
<b>Program Definition:</b>		<p>The Division of Medical Services primary responsibility is the management of the Arkansas Medicaid Program. The organizational units of the Division include:</p> <ol style="list-style-type: none"> <li>1) Medical Services- This Office includes the Prescription Drug Program, Utilization Review, Medical Assistance and Field Audit.</li> <li>2) Long Term Care – The role of the Office of Long Term Care is to license and certify LTC facilities and staff in compliance with state and/or federal regulations perform complaint investigations and medical need determinations.</li> <li>3) Children’s Medical Services – This Office provides case coordination and services to children with disabilities and chronic illnesses.</li> <li>4) Administrative Support Services – This Office is responsible for budgeting, expenditure monitoring &amp; evaluation, personnel management, contracts, managing the Medicaid Management Information System, institutional and non-institutional reimbursement, and Third Party Liability.</li> <li>5) Director’s Office- This office is responsible for the short and long range planning for DMS programs, processing Medicaid State Plan amendments and policy development.</li> </ol>
<b>Funds-Center Code:</b>	<u><b>392</b></u>	
<b>AGENCY GOAL(S) #</b>	<b>1</b>	
<b>Anticipated Funding Sources for the Program:</b>		General Revenue, Federal Funds, Other Funds.

**GOAL 1: (Sub-Funds Center Code: 392GOAL1 )**

To provide administrative support for the Division of Medical Services.

**OBJECTIVE 1: (Sub-Funds Center Code: 392G1OBJ1 )**

**To provide administrative services necessary to effectively carry out the State Medicaid Plan including planning, policy development and fiscal administration.**

**STRATEGY 1: (Sub-Funds Center Code: 392A )**

**Provide administrative support, short and long range planning for DMS programs. Process State Plan**

# **STRATEGIC PLAN**

amendments, update and maintain provider manuals and other policy development and to provide technical support to DMS programs including systems support, institutional and non-institutional reimbursement, third party liability, and general financial activities.

**OBJECTIVE 2: (Sub-Funds Center Code: 392G1OBJ2 )**

To provide quality an accurate DMS Management Information Systems platform, information technology, and support services to maximize system accessibility for DMS staff and providers.

**STRATEGY 1: (Sub-Funds Center Code: 392B)**

To provide timely processing of valid claims, to continue using a federally approved Medicaid Management Information System and to comply with federal HIPAA regulations.

**OBJECTIVE 3: (Sub-Funds Center Code: 392G1OBJ3 )**

To continue to implement Utilization Review and Field Audit Activities to insure compliance with federal and state regulations and policy, monitor the quality of services delivered, authorize necessary medical services, and identify possible fraud and abuse.

**STRATEGY 1: (Sub-Funds Center Code: 392C )**

Provide technical support to the DMS programs by performing prior authorizations, enrollment, provider communications, utilization review, pharmacy support, dental, visual, and field audit.

**OBJECTIVE 4: (Sub-Funds Center Code: 392G1OBJ4 )**

To ensure that the health and safety of the public is promoted and safeguarded through proper licensing, certification and oversight of Long-Term Care facilities.

**STRATEGY 1: (Sub-Funds Center Code: 392D )**

Provide administrative support to the Long Term Care Programs (LTC) to include performing licensure and certification of LTC facilities and staff, complaint investigations, medical need determinations.

# STRATEGIC PLAN

<b>Agency Name</b>	DHS – Division of Medical Services
<b>Program</b>	Administration

## PERFORMANCE MEASURES: (Effort, Output, Outcome, and/or Efficiency)

<b>DESCRIPTION</b> (Indicate the Goal and Objective to which applicable)	<b>METHODS AND SOURCES USED OBTAINING DATA</b>	<b>FISCAL YEAR 2003</b>	<b>FISCAL YEAR 2004</b>	<b>FISCAL YEAR 2005</b>	<b>FISCAL YEAR 2006</b>	<b>FISCAL YEAR 2007</b>
Number of Prior year audit findings repeated in subsequent audit.	<b>Audit Report</b>	0	0	0	0	0
Recipient participation as a percentage of the total Medicaid program enrollees	Use of Decision Support System (DSS) to compare # of recipients	80%	81%	82%	83%	85%
Consumer satisfaction rate per biannual survey	Use of Consumer Assessment Health Plans Survey (CAHPS) completed every two years.	90%		90%		90%
Percent of counties with Primary Care Physician (PCP) to provide services to enrollees.	Use of PCP report	100%	100%	100%	100%	100%

## STRATEGIC PLAN

<b>DESCRIPTION</b> (Indicate the Goal and Objective to which applicable)	<b>METHODS AND SOURCES USED OBTAINING DATA</b>	<b>FISCAL YEAR 2003</b>	<b>FISCAL YEAR 2004</b>	<b>FISCAL YEAR 2005</b>	<b>FISCAL YEAR 2006</b>	<b>FISCAL YEAR 2007</b>
Continued Federal Approval	Federal Grant Award	Yes	Yes	Yes	Yes	Yes
Continued Federal Approval of the MMIS	Federal Approval	Yes	Yes	Yes	Yes	Yes
Percentage of prior approvals completed for program services requiring prior approval.	Use of reports of prior approvals/denials.	100%	100%	100%	100%	100%
Program savings including identification of overpayments and cost avoidance as a percentage of the costs of utilization review and TPL activities.	Cost Avoidance Reports, overpayment reports and collections.	100%	100%	100%	100%	100%
Percentage of LTC Facilities Surveyed annually in accordance with regulations compared to total LTC facilities.	Use of Long Term Care (LTC) data base report by facility type, facilities surveyed	80%	82%	83%	84%	85%



## STRATEGIC PLAN

<b>DESCRIPTION</b> (Indicate the Goal and Objective to which applicable)	<b>METHODS AND SOURCES USED OBTAINING DATA</b>	<b>FISCAL YEAR 2003</b>	<b>FISCAL YEAR 2004</b>	<b>FISCAL YEAR 2005</b>	<b>FISCAL YEAR 2006</b>	<b>FISCAL YEAR 2007</b>
Percentage of LTC Complaints Investigated within regulatory timeframes compared to total complaints.	Use of LTC data base report for complaints by facility type.	90%	90%	91%	91%	92%
Percentage of agency performance measures met.		TBD	TBD	TBD	TBD	TBD
Percentage of agency staff and budget in the Administration Program compared to total agency positions and budget.		TBD	TBD	TBD	TBD	TBD
Number of agency proprietary systems maintained by agency staff or maintained through contractual services.		TBD	TBD	TBD	TBD	TBD
Agency information technology budget as a percent of total agency budget.		TBD	TBD	TBD	TBD	TBD

# STRATEGIC PLAN

Agency Name		DHS Division of Medical Services
Program		Prescription Drugs
Program Authorization		Title XIX, Title XXI, 42 CFR
Program Definition:		Prescription Drug
Funds-Center Code: 404		
AGENCY GOAL(S) #	2	
Anticipated Funding Sources for the Program:		General Revenue, Federal Funds, Other Funds.

## **GOAL 1: (Sub-Funds Center Code: 404GOAL1 )**

To provide quality health care services to enrolled participants in DMS programs and to increase awareness and improve access to DMS services.

### **OBJECTIVE 1: (Sub-Funds Center Code: 404G2OBJ1 )**

To provide eligible recipients in the prescription Drug Program with necessary prescriptions while assuring improved pharmaceutical cost controls measures.

#### **STRATEGY 1: (Sub-Funds Center Code: 404A )**

To continue to maximize the collections from drug rebate agreements and to explore, develop, and evaluate new and better ways to address the costs of prescription drugs including the dispensing of generic drugs.

### **OBJECTIVE 2: (Sub-Funds Center Code: 404G2Obj2 )**

To provide eligible recipients in the ARKids First Program with necessary prescriptions while assuring improved pharmaceutical cost controls measures.

#### **STRATEGY 1: (Sub-Funds Center Code: 404C )**

To continue to maximize the collections from drug rebate agreements and to explore, develop, and evaluate new and

# **STRATEGIC PLAN**

**better ways to address the costs of prescription drugs including the dispensing of generic drugs.**

**OBJECTIVE 3: (Sub-Funds Center Code: 404G2Obj3 )**

**To provide eligible recipients under the prescription drug waiver for the elderly with necessary prescriptions while assuring improved pharmaceutical cost controls measures.**

**STRATEGY 1: (Sub-Funds Center Code: 404E )**

**To continue to maximize the collections from drug rebate agreements and to explore, develop, and evaluate new and better ways to address the costs of prescription drugs including the dispensing of generic drugs.**

---

# STRATEGIC PLAN

<b>Agency Name</b>	DHS Division of Medical Services
<b>Program</b>	Prescription Drugs

## PERFORMANCE MEASURES: (Effort, Output, Outcome, and/or Efficiency)

<b>DESCRIPTION</b> (Indicate the Goal and Objective to which applicable)	<b>METHODS AND SOURCES USED OBTAINING DATA</b>	<b>FISCAL YEAR 2003</b>	<b>FISCAL YEAR 2004</b>	<b>FISCAL YEAR 2005</b>	<b>FISCAL YEAR 2006</b>	<b>FISCAL YEAR 2007</b>
Percentage of Recipients receiving medically necessary prescriptions	Use of Decision Support System (DSS) to obtain geographic information regarding recipients	100%	100%	100%	100%	100%
Percentage of Drug Rebates compared to total prescription drug expenditures	Drug Rebate and expenditure reports	18%	18%	19%	19%	19%
Percentage of prescription drugs filled with generic drugs.	DSS	48%	49%	50%	52%	54%

# STRATEGIC PLAN

<b>Agency Name</b>		DHS Division of Medical Services
<b>Program</b>		Long Term Care
<b>Program Authorization</b>		Title XIX, Title XXI, 42 CFR
<b>Program Definition:</b>		Private Nursing Home, Public Nursing Home, Intermediate Care Facilities for the Mentally Retarded and Infant Infirmaries
<b>Funds-Center Code:</b>	<u>404</u>	
<b>AGENCY GOAL(S) #</b>	<b>2</b>	
<b>Anticipated Funding Sources for the Program:</b>		General Revenue, Federal Funds, Other Funds.

## **GOAL 1: (Sub-Funds Center Code: 404GOAL1 )**

To provide quality health care services to enrolled participants in DMS programs and to increase awareness and improve access to DMS services.

### **OBJECTIVE 1: (Sub-Funds Center Code: 404G1Obj1 )**

To provide appropriate Medicaid reimbursement for residents of Public Nursing Home facilities.

#### **STRATEGY 1: (Sub-Funds Center Code: 404A )**

Provide Nursing Facility services to eligible recipients.

### **OBJECTIVE 2: (Sub-Funds Center Code: 404G1Obj2 )**

To provide appropriate Medicaid reimbursement for residents of Private Nursing Home facilities.

#### **STRATEGY 1: (Sub-Funds Center Code: 404B )**

Provide Nursing Facility services to eligible recipients.

### **OBJECTIVE 3: (Sub-Funds Center Code: 404G1Obj3 )**

To provide appropriate Medicaid reimbursement for residents of Intermediate Care Facilities for The Mentally Retarded and Infant Infirmaries.

#### **STRATEGY 1: (Sub-Funds Center Code: 404C )**

Provide Nursing Facility services to eligible recipients.

# STRATEGIC PLAN

<b>Agency Name</b>	DHS Division of Medical Services
<b>Program</b>	Long Term Care

## PERFORMANCE MEASURES: (Effort, Output, Outcome, and/or Efficiency)

<b>DESCRIPTION</b> (Indicate the Goal and Objective to which applicable)	<b>METHODS AND SOURCES USED OBTAINING DATA</b>	<b>FISCAL YEAR 2003</b>	<b>FISCAL YEAR 2004</b>	<b>FISCAL YEAR 2005</b>	<b>FISCAL YEAR 2006</b>	<b>FISCAL YEAR 2007</b>
Average Monthly recipient Caseload. •Public Nursing Homes •Private Nursing Homes •ICF/MR	Use of Decision Support System (DSS) to obtain geographic information regarding recipients	TBD	TBD	TBD	TBD	TBD
Average Monthly cost per Medicaid eligible client •Public Nursing Homes •Private Nursing Homes •ICF/MR	Use of Decision Support System (DSS) to obtain geographic information regarding recipients	TBD	TBD	TBD	TBD	TBD

# STRATEGIC PLAN

<b>Agency Name</b>		DHS Division of Medical Services
<b>Program</b>		Hospital/Medical Services
<b>Program Authorization</b>		Title XIX, Title XXI, 42 CFR
<b>Program Definition:</b> _____  <b>Funds-Center Code:</b> <b>404</b>		Hospital/Medical Services
<b>AGENCY GOAL(S) #</b>	<b>2</b>	
<b>Anticipated Funding Sources for the Program:</b>		General Revenue, Federal Funds, Other Funds.

## **GOAL 1: (Sub-Funds Center Code: 404GOAL1 )**

To provide quality health care services to enrolled participants in DMS programs and to increase awareness and improve access to DMS services.

### **OBJECTIVE 1: (Sub-Funds Center Code: 404G1Obj1 )**

To improve access to Inpatient Hospital services for Arkansas Medicaid eligibles and to continue to explore, develop and evaluate options for providing health care in the least restrictive environment.

### **STRATEGY 1: (Sub-Funds Center Code: 404A )**

To provide administrative services necessary to effectively carry out the State Medicaid Plan including planning, policy development and fiscal administration.

### **OBJECTIVE 2: (Sub-Funds Center Code: 404G1Obj2 )**

To improve access to Mental Health services for Arkansas Medicaid eligibles and to continue to explore, develop and evaluate options for providing health care in the least restrictive environment.

### **STRATEGY 1: (Sub-Funds Center Code: 404B )**

To provide administrative services necessary to effectively carry out the State Medicaid Plan including planning, policy development and fiscal administration.

# **STRATEGIC PLAN**

## **OBJECTIVE 3: (Sub-Funds Center Code: 404G1Obj3 )**

**To improve access to Outpatient Hospital services for Arkansas Medicaid eligibles and to continue to explore, develop and evaluate options for providing health care in the least restrictive environment.**

### **STRATEGY 1: (Sub-Funds Center Code: 404C )**

**To provide administrative services necessary to effectively carry out the State Medicaid Plan including planning, policy development and fiscal administration.**

## **OBJECTIVE 4: (Sub-Funds Center Code: 404G1Obj4 )**

**To improve access to Other Care Services for Arkansas Medicaid eligibles and to continue to explore, develop and evaluate options for providing health care in the least restrictive environment.**

### **STRATEGY 1: (Sub-Funds Center Code: 404D )**

**To provide administrative services necessary to effectively carry out the State Medicaid Plan including planning, policy development and fiscal administration.**

## **OBJECTIVE 5: (Sub-Funds Center Code: 404G1Obj5 )**

**To improve access to Waiver services for Arkansas Medicaid eligibles and to continue to explore, develop and evaluate options for providing health care in the least restrictive environment.**

### **STRATEGY 1: (Sub-Funds Center Code: 404E )**

**To provide administrative services necessary to effectively carry out the State Medicaid Plan including planning, policy development and fiscal administration.**

## **OBJECTIVE 6: (Sub-Funds Center Code: 404G1Obj6 )**

**To provide eligible recipients in the ARKids First B and SCHIP Program with access to health care services and to continue to explore, develop and evaluate options for providing health care in the least restrictive environment.**

### **STRATEGY 1: (Sub-Funds Center Code: 404F )**

**To provide administrative services necessary to effectively carry out the State Medicaid Plan including planning, policy development and fiscal administration**



# STRATEGIC PLAN

<b>Agency Name</b>	DHS Division of Medical Services
<b>Program</b>	Hospital/Medical Services

## PERFORMANCE MEASURES: (Effort, Output, Outcome, and/or Efficiency)

<b>DESCRIPTION</b> (Indicate the Goal and Objective to which applicable)	<b>METHODS AND SOURCES USED OBTAINING DATA</b>	<b>FISCAL YEAR 2003</b>	<b>FISCAL YEAR 2004</b>	<b>FISCAL YEAR 2005</b>	<b>FISCAL YEAR 2006</b>	<b>FISCAL YEAR 2007</b>
Percentage of Medicaid eligible participants enrolled in the Arkansas ConnectCare Managed Care Program	Use of Decision Support System (DSS) to obtain PCP information regarding recipients	100%	100%	100%	100%	100%
Participation as a percentage of program budget	Use of weekly Staff Report to compare budget to actual for each service category	100%	100%	100%	100%	100%
Continued federal state plan approval.		Yes	Yes	Yes	Yes	Yes

## STRATEGIC PLAN

<b>Continued access to the ConnectCare primary care network of 1800 providers enrolled in the Medicaid Program</b>	<b>Use of the MMIS to obtain PCP information</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>
<b>Percentage of rates set according to the reimbursement methodology in the federally approved Medicaid State Plan</b>	<b>Use of State Plan</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>
<b>Recipients served by Home and Community Based Waivers</b>	<b>Use of DSS</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>
<b>Percent of Program Eligibles receiving Inpatient Hospital Services</b>	<b>Use of DSS</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>
<b>Percent of Program Eligibles receiving Mental Health Services</b>	<b>Use of DSS</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>
<b>Percent of Program Eligibles receiving Outpatient Hospital Services</b>	<b>Use of DSS</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>
<b>Percent of Program Eligibles receiving Other Care Services</b>	<b>Use of DSS</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>
<b>Percent of ARKids First B and SCHIP Program Eligibles receiving Services</b>	<b>Use of DSS</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>

# STRATEGIC PLAN

Agency Name		DHS Division of Medical Services
Program		Tobacco Settlement Medicaid Expansion Program
Program Authorization		Title XIX, Title XXI, 42 CFR
Program Definition:		Tobacco Settlement Medicaid Expansion Program
Funds-Center Code: 404		
AGENCY GOAL(S) #	2	
Anticipated Funding Sources for the Program:		General Revenue, Federal Funds, Other Funds.

## **GOAL 1: (Sub-Funds Center Code: 404GOAL1 )**

To provide quality health care services to enrolled participants in DMS programs and to increase awareness and improve access to DMS services.

### **OBJECTIVE 1: (Sub-Funds Center Code: 404G1Obj1 )**

To provide expanded Medicaid coverage and benefits to pregnant women.

### **STRATEGY 1: (Sub-Funds Center Code: 404A )**

Provide access to services and maintain federal approval of the state plan.

### **OBJECTIVE 2: (Sub-Funds Center Code: 404G1Obj2 )**

To provide expanded inpatient hospital benefits to adults aged nineteen (19) to sixty-four (64).

### **STRATEGY 1: (Sub-Funds Center Code: 404B )**

Provide access to services and maintain federal approval of the state plan.

# **STRATEGIC PLAN**

**OBJECTIVE 3: (Sub-Funds Center Code: 404G1Obj3 )**

**To provide expanded coverage and benefits to adults aged sixty-five (65) and over.**

**STRATEGY 1: (Sub-Funds Center Code 404C )**

**Provide access to services and maintain federal approval of the state plan.**

**OBJECTIVE 4: (Sub-Funds Center Code: 404G1Obj4 )**

**To create and provide a limited benefit package of Medicaid coverage and benefits to adults aged nineteen (19) to sixty-four(64).**

**STRATEGY 1: (Sub-Funds Center Code: 404D )**

**Provide access to services and maintain federal approval of the state plan.**

# STRATEGIC PLAN

<b>Agency Name</b>	DHS Division of Medical Services
<b>Program</b>	Tobacco Settlement Medicaid Expansion Program

## PERFORMANCE MEASURES: (Effort, Output, Outcome, and/or Efficiency)

<b>DESCRIPTION</b> (Indicate the Goal and Objective to which applicable)	<b>METHODS AND SOURCES USED OBTAINING DATA</b>	<b>FISCAL YEAR 2003</b>	<b>FISCAL YEAR 2004</b>	<b>FISCAL YEAR 2005</b>	<b>FISCAL YEAR 2006</b>	<b>FISCAL YEAR 2007</b>
Unduplicated number of pregnant women receiving services provided under the Tobacco Settlement	Use of Decision Support System (DSS) to obtain information regarding recipients	2000	3000	4000	4000	4000
Unduplicated number of adults aged 19-64 receiving expanded inpatient services provided under the Tobacco Settlement	Use of Decision Support System (DSS) to obtain information regarding recipients	TBD	TBD	TBD	TBD	TBD
Unduplicated number of adults aged 65 and over receiving expanded services provided under the Tobacco Settlement	Use of Decision Support System (DSS) to obtain information regarding recipients	TBD	TBD	TBD	TBD	TBD

## STRATEGIC PLAN

<b>DESCRIPTION</b> (Indicate the Goal and Objective to which applicable)	<b>METHODS AND SOURCES USED OBTAINING DATA</b>	<b>FISCAL YEAR 2003</b>	<b>FISCAL YEAR 2004</b>	<b>FISCAL YEAR 2005</b>	<b>FISCAL YEAR 2006</b>	<b>FISCAL YEAR 2007</b>
<b>Continued federal state plan approval.</b>		Yes	Yes	Yes	Yes	Yes
Per cent of administrative costs & positions compared total program costs	Expenditure reports	20%	5%	5%	5%	5%
<b>Unduplicated number of adults aged 19-64 receiving a limited benefit package through the Tobacco Settlement</b>	<b>Use of Decision Support System (DSS) to obtain information regarding recipients</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>	<b>TBD</b>

# **STRATEGIC PLAN**

## **SUPPLEMENTAL DATA TO BE INCLUDED WITH INTERIM PROGRESS REPORT**

- Breakdown of Expenditures by State Category of Service
- Breakdown of Expenditure by Eligibility Aid Category
- Breakdown of Expenditure by County

# STRATEGIC PLAN